## **Commission on Teacher Credentialing**



1900 Capitol Avenue Sacramento, CA 95811 (916) 327-2967 Fax (916) 327-3165 www.ctc.ca.gov *Professional Services Division* 

## Demographic Information (to be completed by nominee)

Committee on Accreditation Nominee  K-12 or IHE	
☐ School district	☐ California State University
$\square$ County Office of Education	☐ University of California
□ Other	$\square$ Private/Independent College or University
☐ Teacher	☐ Faculty
$\square$ Site Administrator	$\square$ Director of Teacher Education
$\square$ District/County Office Administrator	☐ Associate Dean
$\square$ Associate Superintendent	☐ Dean
☐ Superintendent	☐ Other
□ Other	
Region of Ca	lifornia
☐ Northern California	☐ Bay Area
☐ Central Valley	☐ Los Angeles Area
☐ Inland Empire	☐ San Diego Area
Voluntary Disclosur	re of Ethnicity
☐ African American	☐ Native American
☐ Asian American	$\square$ Pacific Islander
☐ Caucasian	☐ Southeast Asian
☐ Hispanic/Latino	☐ Decline to State

Please complete this information page and return to <a href="accreditation@ctc.ca.gov">accreditation@ctc.ca.gov</a>
by February 28, 2023.